## RECEWED

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Amendment

**Disclosure Report Cover** ☐ Yes Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information. 1. Committee Into mation i. Full Name Craig Morrison for Mayor ). Mailing Address (include City, State and Zip Code) d. Date Filed 10/24/2019 155 Longleaf Rd e. Phone Number Southern Pines, NC 28387 910-728-0127 reasurer Full Name 4. Period End Date model 2. Report Year 3. Period Start Date (mm/dd/yy) Craig Scott Morrison 9/25/2019 2019 Type of Report only one type of rep . Type of Committee (Check One) State/County Referendum Party Candidate Campaign Municipal Organizational Organizational PAC Referendum Organizational Pre-referendum Thirty-five day Quarterly Independent Expenditure Joint Fundraiser Final Pre-primary First Legal Expense Fund Supplemental Final Pre-election Second Annual Pre-runoff Third 7. Type of Fund - (if applicable, theck one) Special Fourth Semi-annual Booster Fund Building Fund Mid Year Semi-annual Mid Year 10. Special Report Name Year End Year End Other: Final Final Special 8. Number of Fundraisers this Report Special 0 1. Account Information 11. Account Information a. Financial Institution Full Name : Financial Institution Full Name Wells Fargo Bank c. Account Code b. Purpose b. Purpose All campaign expenses 1 d. Period Begin Balance d.Period Begin Balance 💛 \$ 0 CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections. 10/24/2019 Craig S Morrison Date Signature of Appointed Treasurer Printed Name of Signer FOR OFFICE USE ONLY Delivery Method Employee Date Received Normal Mail ■ Registered Mail Employee Date Postmarked M Hand Delivered Electronically Filed Employee: Date Scanned Signer has not received Date Data Entered: Employee: mandatory training Please Note: This form cannot be used to amend committee information such as the committee address, treasurer,

CRO-1000

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

NC State Board of Elections

assistant treasurer, custodian of books information, or account information.

August 2008

Minist School British Coly

**Detailed Summary** 

Amendment

Yes No

Use this form to summarize all disclosure reporting forms and	to total mor	etary information	L Yes L No
La Committee (a) Name (and Fund it applicable).			3.1D Number
Craig Morrison for Mayor	Pre-Ele	ction	
Start of Election Cycle: January 1, 2019		Total this Reporting Period	
4) Cash on Hand at Start		\$ 0	\$ 0
RECEIPTS		Productive College (Co.)	
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$ 1,800.00	\$ 1,800.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$ 1,800.00	\$ 1,800.00
EXPENDITURES #			
13) Disbursements	**************************************		<b>是一种种种的</b>
13a) Operating Expenditures	(CRO-1310)	\$	\$
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)		\$ 1,673.58
19) Cash on Hand at End (Add lines 4 and 12 together, then su	otract line 18	\$ 126.42	\$ 126.42
ADDITIONAL INFORMATION	(GD 0 1000)	<u> </u>	Property and the second
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ *****	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	.\$-	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	THE SECOND SERVICE OF STREET
24) Account Transfers Within the Committee	(CRO-1720)	\$	tem presentation
25) Administrative Support	(CRO-1710)	\$	<b>:\$</b>
26) Forgiven Loans	(CRO-1440)	\$	\$
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$
28) Contributions to be Refunded  CRO-1100 NC State Box	(CRO-1215) ard of Elections	\$	\$ August 200

-		om Individua		Pg	1 of	Yes C	] No
		ndividual contribution e (and Fund if appl		ontributions unde		O 1205 is not used 2. ID Number	
	ig Morrison						
	ibutor Informa			Add Rei		11.	
The state of the state of	me, Mailing Addre city, state, & zip)	ss & Phone		b. Job Title/Profes		d. Comments	
	Morrison	CHRONOLOGY STATE OF THE STATE OF	20.95486 19.03 (9e 91.03, 158, 158, 158	Other Personal		Candidate	
155 l	ongleaf Rd	•		c. Employer's Nan			
Sout	hern Pines, I	NC 28387		Valhalla & M	orrison, LLC	e, Election Sum to Dat	
Section 1	rosanis kasas sana sana sana sana sana	emperatoriscoperaciones de Mario				\$ 1,800 .00	
t.Prior	g. Account Code	h. Form of Payment draft	i In-Kind Descrip	tion .	j. Date (mm/dd/yyy 7/23/2019	y)	
	1	draft				\$ 900.00	
	<u> </u>				9/16/2019		
	1	draft			10/15/2019	\$ 800.00	
	ibutor Informa ne, Mailing Addre			Add Rer b. Job Title/Profes		d. Comments	130000
(include	city, state, & zip)						
				c. Employer's Nan	ne/Specific/Field		j
			Parkangkan, kang laman menghabitan		in-amin'ny vitatran'i Prisant	e. Election Sum to Da	e e
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f. Prior	g. Account Code	h. Form of Payment	i. in-Kind Descrip	tion and the second	Date (mm/dd/yy)	y) // k. Amount	es es es es es
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SEE CASE SECTION OF THE PERSON	me, Mailing Addre e city, state, & zip)	ss & Phone		b. Job Title/Profes	ssion	d. Comments	
	A reset of Cart (1986) At 1881 (1986)			c. Employer's Nar	ne/Specific Field		
a Joseph Cate							
PROFESSION OF THE PROPERTY OF					•	e. Election Sum to Da \$	te 🛬 🚉
il. Prior	g. Account Code	h. Form of Payment	i-In-Kind Deseri	otion	j. Date (mm/dd/vy		
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				<u></u>		\$	
						\$	
4. Tot	al only this P	age			1	\$ 1,800.00	
5. Tot	al of ALL CI	RO-1210 Pages				\$ 1,800.00	
CRO-12	e et telefici i tretico de la contrato de la teleficial	Fof Detailed Summary F	医医性病毒性一种 医多种乳 化乙基二甲甲酚 化邻羟基甲甲甲甲醛	ard of Elections			April 2007

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**Disbursements** 

			0	Amendment	
Pg	_1_	of	<u>3</u>	☐ Yes	☐ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

	coordinated party exp					2. ID Number
Craig Morr	ison for Mayor					
3. Type of Disbi	irsement (Please i	use separate CR	0-1310	forms for e	ach type of Dish	ursement.)
Operating Expe		ibutions to Candidat			Remove.	rdinated Party Expenditures
	ailing Address & Pho	ne	_		d Committee Name	d. Comments
(include city, state,	& zip).		1905, S			
Harland C			-	c, Level Regis	itered (Specify)	
	Cantera Parkwa	у	,	Federal State	County: Municipa	lity: e. Election Sum to Date
San Anton	io, TX 78256				ern Pines, NO	
				nm/dd/yyyy)		k, Required Remarks
f. Account Code	g. Form of Payment  Draft	h, Purpose Code K			\$ 20.00	Checks
			00,0	3,20.0	\$	
4. Pavec Inform	ation			Add 🔲	Remove	
and the second second second second second second	ng Address & Phone			b: Coordinate	d Committee Name	d Comments
(include city, stat GODADDY.	Charles and the second of the				a a war i waa	
	ayden Rd., Ste.	226		c, Level Regis	tered (Specify)	
Scottsdale,				State	County:  Municipa	lity: e. Election Sum to Date
oconodaro,	, 00200			South	ern Pines, N	C \$ 25.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (ı	nm/dd/yyyy)	j. Amount	k. Required Remarks
1	Debit Card	Α	9/1	7/19	\$ 25.00	Website
				. · · · · · · · · · · · · · · · · · · ·	\$	
4. Payee Inform	and the second s			The state of the s	Remove	
a. Full Name, Maili (include city, stat	ng Address & Phone	an le l'insersordine del deligion (4 4) e		b. Coordinate	ed Committee Name	d. Comments
Staples		consideration of the Constant Services	Past Art Spire			
290 Turne	r St			c, Level Regi	stered (Specify)	
<b>a</b>	, NC 28315			State	Municipa	lity: e. Election Sum to Date
				Southe	ern Pines, NC	\$ 42.79
I. Account Code	Option the Character, as particular California (Associated Associated Associa	h. Purpose Code		mm/dd/yyyy)	j. Amount	k. Required Remarks
1	Debit Card	В	9/20	)/2019	\$ 42.79	Business Cards
					\$	07.70
5. Total only th						\$ 87,79
The state of the s	CRO-1310 Pages line 13a of Detailed Sum	marv Page CRO-11	00 if One	rating Expens	es)	¢ 1070 50
(This line goes in	line 13b of Detailed Sum	mary Page CRO-11	00 if Con	trib to Candide	ates/Political Comm	) \$ 1673.58
Service Committee Committe	line 13c of Detailed Sum		NATIONAL PROPERTY AND ADDRESS.	name and a second	Expenditures)	
A* - Media	odes (List detailed B* - Printin			ondraising	<b>D</b> - To	Another Candidate
E - Salaries	F* - Equip	nent	·	litical Party	See Fig. 11, 171, 1, 21, 1 (S. C. V. O.C.)	olding Public Office Expenses onation to Legal Expense Fund
I - Postage O* Other	<b>J</b> - Penaltic	28	D. T. P. C.	iffice Exper		onation to Legat Expense rund
2	e detailed explanati	on in required r	emark	sfield (k)		

				Amendment		
Pg	2	of	3	☐ Yes	☐ No	

**Disbursements** Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures I. Committee Full Name (and Fund it applicable) 2. ID Number Craig Morrison for Mayor 3. Type of Dishursement (Please use separate CRO-1310 forms for each type of Dishursement.) Coordinated Party Expenditures Contributions to Candidates/Political Committees Operating Expenses Add Remove 4. Pavee Information b. Coordinated Committee Name a Full Name, Mailing Address & Phone include city, state, & zip) Shutterbug Grafix c. Level Registered (Specify) 300 Kelly Rd Suite C Federal County: e. Election Sum to Date Municipality: State Pinehurst, NC 28374 \$ 685.60 Southern Pines, NC k. Required Remarks h. Purpose Code i. Date (mm/dd/yyyy) | j. Amount Account Code - g. Form of Payment ... \$ 600.00 Signs В Check 10/08/2019 85.60 **Flyers** Check В Add Remove ! 4. Payee Information Full Name, Mailing Address & Phone (include city, state, & zip) Shutterbug Grafix c. Level Registered (Specify) 300 Kelly Rd Suite C Federal County: Municipality: e, Election Sum to Date State Pinehurst, NC 28374

Southern Pines NC \$541.06

				Count	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
f. Account Code	g. Form of Payment	h. Purpose Cade	i. Date (mn	ı/dd/yyyy)	j, Amount	k Required Remark	
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4. Pavec Info	rmation		- L.A.	dd- 🔲	Remove		
a. Full Name, Ma (include city, s	ailing Address & Phone : tate, & zip)		<b>6.</b>	Coordinat	ed Committee Nam	ie 🥢 d. Commuents 🗈	
VistaPrin	it.com		ć.	Level Regi	stered (Specify)		
		•	Ē	Federal	County:		
				State	Municip	ality: e. Election Sum	to Date
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A Library	5. Total only th	is Page	s -1408.55
b		CRO-1310 Pages	
200	7		. 1673.58
		line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)	\$ 1073.36
		line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)	
	(This line goes in	line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)	Target and Administration of the Control of the Con
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1.	rurpuse cou	es i distructured experience	TO COUR III (IE) ADOVE)		
A	- Media	B* - Printing	C* - Fundraising	D - To Another Can	
E	- Salaries	F* - Equipment	G - Political Party	H* - Holding Publi	
I	- Postage	J - Penalties	K* - Office Expense	s Q* - Donation to L	egal Expense Fund
O,	* Other				
¥	Codes require o	letailed explanation in req	nired remarks field (k)		

acor comy fine coff

**Disbursements** 

				Amendment	
_	2		3	<b>□</b> ,,	III No
Pg		01		L Yes	L No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political

	coordinated party exp						2, ID Number
Craig Mor	rison for Mayor						
3. Type of Disbu	irsement (Please	use separate CR	)=1310	forms for e	ich reviol Di	hurse	ment.)
Operating Expe		ibutions to Candidat	es/Politic		Remove	ordinat	ed Party Expenditures
4. Payee Inform a Full Name: Ma	alion aling Address & Pho	ne		and the state of the state of	и Committee Na	ne	d, Comments
(include city, state,			N. (2.3				
DRI Printii	~			Control of the Contro	tered (Specify)		
(UPrinting	.com)			Federal State	County Munici		e: Flection Sum to Date
					ern Pines, N		\$ 152.24
f. Account Code	g Form of Payment	h. Purpose Code	i, Date (r	am/dd/yyyy)	j. Amount		equired Remarks
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Facebook				ce Devel Regi	stered (Specify)	c Grida	
	Way in Menlo Pa	ark, CA 9402	5	Federal	County		
				State	Munic		e. Election Sum to Date
		reconstitution are water normal	MARKEN SARO MARK	25 5 5 5	rn Pines, N		\$ 25.00
f. Account Code	g. Form of Payment  Debit Card	b. Purpose Code :: A		nm/dd/yyyy) 5/2019	3 Amount \$ 25.00	ALCO AND MARKET MARK	equired Remarks hternet Ad
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4. Payee Inform	mtian			Add 🔲	Remove		
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					\$		
5. Total only th							\$ 177.24
	CRO-1310 Pages tine 13a of Detailed Sun	mary Page CRO-11	OO if One	rating Expens	es)		¢ 1672 50
(This line goes in	line 13b of Detailed Sun	mary Page CRO-11	00 if Con	trib to Candid	ates/Political Con	ım)	\$ 1673.58
President and particular agency and	line 13c of Detailed Sun				Expenditures)		-
7. Purpose C A*- Media	odes (List detailed B* - Printi		25) 200 000 000 000 000 000 000 000 000 00	apove) undraising	<b>D</b> - T	'o Ano	ther Candidate
E - Salaries	F*-Equip	ment	G - Po	litical Party	The contract of the contract o	March Contract Contract	ng Public Office Expenses tion to Legal Expense Fund
I - Postage O* Other	<b>J</b> - Penalti	es	<b>X</b> 7. C	ffice Expe	uses	DODA	non to Legai Expense rund
	re detailed explanat	ion in required :	emark	field (k)	34 66	1	u ili ayaran katalah di salah